FOR INSTRUCTIONS, SEE BACK OF FORM	Г	FORM	
DISCLOSURE SUMMARY PAGE	_	DR-2 (Rev. 01/98)	DISCLOSURE REPORT
	E	or Office Use O	
COMMITTEE NAME (Must be same as on Statement of Organization)	1 1	Comm. #	9640
Winnebago Republican Women	. 1 1	ndexed	
IMPORTANT: Indicate type of committee you are reporting for: 5	1 1	omputer	
(1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate (5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee (8) Support State of Candidates		omputer	
Julia H. Burnham 1 641 585 5260			
SIGNATURE OF TREASURER (or person filing this report) TELEPHONE		DATE S	IGNED
Routine Penalties Due For Late Filed Reports Range	<u>E:</u>		
I AM FILING A January 15, 2008 REPORT FOR ANA (1) ELI			ION YEAR.
(report date) In	dicate on	2	
CHECK IF AMENDMENT TO REPORT DATED	Local Con	rmittees, enter Da	ate of Election
☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  (You must continue to file reports until a Notice of Dissolution is filed.)		Local Committees xion is held	s, enter County in
STATEMENT OF CASH ON HAND	•		
CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.)	<b>s</b>	480.31	
ADD TOTAL MONEY TAKEN IN THIS PERIOD			
Schedule A: Cash Contributions total (Attach Schedule A)		761.00	
Schedule F: Loans Received total (Attach Schedule F)		•	
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	-		
(Schedule H applies to Candidates' Committees Only)	•		
SUB-TOTA	\L\$	1241.31	
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		1241.71	
Schedule B: Expenditures total (Attach Schedule B)	********	50.00	
Schedule F: Loan Repayments total (Attach Schedule F)			
CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)			

UNPAID BILLS (From Schedule D - Attach Schedule D) ......\$

OUTSTANDING LOANS (From Schedule F - Attach Schedule F) ......\$

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?)

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E).....\$

\_\_\_\_ YES \_\_\_\_ NO

1/30/07	DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FO FUND RAISE INCOM
1/30/07   CK#   Dues   485.00     1/6/07   CK#   Dues   80.00     1/14/07   CK#   Dues   48.00     1/14/07   CK#   Dues   26.00     2/12/07   CK#   Dues   16.00     2/26/07   CK#   Dues   16.00     1D#   CK#   ID#   CK#   CK#	/25/07		Luncheon \$95.00 Dues 11.00		\$ 106.00	
1/6/07   CK#   Dues   80.00	1/30/07		Dues		485.00	
1/14/07	1/6/07		Dues		80.00	
2/12/07 CK# Dues 26.00  1D#	1/14/07		Dues		48.00	
Due   Due	2/12/07		Dues		26.00	
CK#	2/26/07				16.00	
CK#						
CK#	, , , , , , , , , , , , , , , , , , , ,					

SCHEDULE Α

(Rev. 06/97)

MONETARY

CHECK THIS BOX IF

**AMENDING FORM** 

RECEIPTS

For Instructions, See Back of Form

**CONTRIBUTIONS -- MONEY TAKEN IN** 

(including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

## FOR INSTRUCTIONS. SEE BACK OF FORM

## **EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
	CK THIS BOX IF INDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization,	<b>COMMITTEE NAME</b>	(Must be same as on	Statement of (	Organization)
---	-----------------------	---------------------	----------------	---------------

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
	CHECK NUMBER			
8/9/07	ID# CK# 1073	State of Iowa	Penalty for late report	\$ 50.00
	ID#			
	CK#			
	ID#			
	CK#	•		
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#	A.		
	CK#	•		
	ID#			
	CK#			
			SUB-TOTAL	\$
			TOTAL (if last page of this schedule)	\$ 50.00

## IIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

rchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

penditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on hedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to hedule G instructions and Iowa Code 56.6(3)(I).)

Page	1		of	_1_	
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